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Bib Data Sheet

CONFIRMATION NO. 8598

SERIAL NUMBER 09/913,305	FILING DATE 08/13/2001 RULE	CLASS 707	GROUP ART UNIT 2174 2175	ATTORNEY DOCKET NO. U013599-4
APPLICANTS Yoshihiro Yano, Tokyo, JAPAN; Naoyuki Oshima, Tokyo, JAPAN; Fukio Handa, Tokyo, JAPAN; ** CONTINUING DATA ***** <i>Verified Am</i> THIS APPLICATION IS A 371 OF PCT/JP00/08986 12/19/2000 ** FOREIGN APPLICATIONS ***** <i>Verified Am</i> JAPAN 11/360273 12/20/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/21/2002				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	STATE OR COUNTRY JAPAN	SHEETS DRAWING 4	TOTAL CLAIMS 16 20	INDEPENDENT CLAIMS 1
ADDRESS 00140				
TITLE Distributed data archive device and system				
FILING FEE RECEIVED 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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BIBDATASHEET

CONFIRMATION NO. 34

Bib Data Sheet

SERIAL NUMBER 09/916,663	FILING DATE 07/26/2001 RULE	CLASS 707	GROUP ART UNIT 2175	ATTORNEY DOCK NO. US20 01 0040
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APPLICANTS

Alain Sarraf, Herrenberg, GERMANY;
Uwe Nassal, Pforzheim, GERMANY;

** CONTINUING DATA *Verified An* *****

** FOREIGN APPLICATIONS *Verified An* *****
EUROPEAN PATENT OFFICE (EPO) EP 00 127 965.2 12/20/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 09/10/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 0	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials				

ADDRESS
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TITLE
Interface to a network management system of a communication network

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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RECEIVED
1080

☐ 1.18 Fees (Issue)

☐ Other _____

☐ Credit